

01-10-07

PTO/SB/21 (04-04)

Approved for use through 07/31/2006. OMB 0651-0031

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

		Application Number	10/808,250
		Filing Date	March 24, 2004
		First Named Inventor	Takamitsu HIGUCHI
		Art Unit	1722
		Examiner Name	Matthew J. Song
Total Number of Pages in This Submission		Attorney Docket Number	9319G-000747

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Terminal Disclaimers(2)	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Return Receipt Postcard
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Certified Copy of Priority Document(s)		
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application		
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53		

Remarks

The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 50-3213. A duplicate copy of this sheet is enclosed.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name G. Gregory Schivley Bryant E. Wade	Reg. No. 27,382 40,344
Signature			
Date	January 9, 2007		

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Typed or printed name	G. Gregory Schivley / Bryant E. Wade	Express Mail Label No.	EV 757 778 692 US
Signature		Date	January 9, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 1,12 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**FEES TRANSMITTAL
for FY 2006**

Effective 2006. Patent fees are subject to annual revision.

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 260)**Complete if Known**

Application Number	10/808,250
Filing Date	March 24, 2004
First Named Inventor	Takamitsu HIGUCHI
Examiner Name	Matthew J. Song
Art Unit	1722
Attorney Docket No.	9319G-000747

METHOD OF PAYMENT (check all that apply)
 Check Credit card Money Order Other None
 Deposit Account:

Deposit Account Number

Deposit Account Name

The Director is authorized to: (check all that apply)

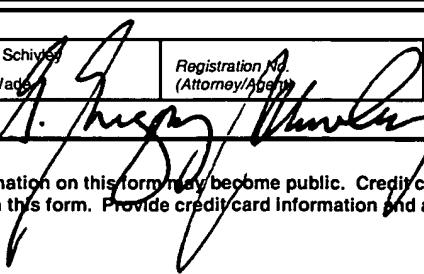
-
- Charge fee(s) indicated below
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- Credit any overpayments
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- Charge any additional fee(s) during the pendency of this application
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-
- Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Small Entity

Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid	
1051	130	2051	65	Surcharge - late filing fee or oath	<input type="text"/>	
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet	<input type="text"/>	
1053	130	1053	130	Non-English specification	<input type="text"/>	
1812	2,520	1812	2,520	For filing a request for reexamination	<input type="text"/>	
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action	<input type="text"/>	
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action	<input type="text"/>	
1251	120	2251	60	Extension for reply within first month	<input type="text"/>	
1252	450	2252	225	Extension for reply within second month	<input type="text"/>	
1253	1020	2253	510	Extension for reply within third month	<input type="text"/>	
1254	1,590	2254	795	Extension for reply within fourth month	<input type="text"/>	
1255	2,160	2255	1080	Extension for reply within fifth month	<input type="text"/>	
1401	500	2401	250	Notice of Appeal	<input type="text"/>	
1402	500	2402	250	Filing a brief in support of an appeal	<input type="text"/>	
1403	1000	2403	500	Request for oral hearing	<input type="text"/>	
1452	500	2452	250	Petition to revive – unavoidable	<input type="text"/>	
1453	1500	2453	750	Petition to revive – unintentional	<input type="text"/>	
1462	400	1462	400	Petition fee under 37 CFR 1.17(f)	<input type="text"/>	
1463	200	1463	200	Petition fee under 37 CFR 1.17(g)	<input type="text"/>	
1464	130	1464	130	Petition fee under 37 CFR 1.17(h)	<input type="text"/>	
1807	50	1807	50	Processing fee under 37 CFR 1.17 (q)	<input type="text"/>	
1806	180	1806	180	Submission of Information Disclosure Stmt	<input type="text"/>	
Total Claims	-20 **	= 0	X <input type="text"/>	= 0	Recording each patent assignment per property (times number of properties)	<input type="text"/>
Independent Claims	-3 **	= 0	X <input type="text"/>	= 0	<input type="text"/>	
Multiple Dependent			<input type="text"/>	= 0	<input type="text"/>	
SUBTOTAL (1)			<input type="text" value="(\$ 0)"/>		<input type="text"/>	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE						
Extra Claims		Fee from below		Fee Paid		
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Independent Claims	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	
Multiple Dependent			<input type="text"/>	= 0	<input type="text"/>	
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3. SEARCH/EXAMINATION FEES						
Fee Description						
Claims in excess of 20					<input type="text"/>	
Independent claims in excess of 3					<input type="text"/>	
Multiple dependent claim, if not paid					<input type="text"/>	
** Reissue independent claims over original patent					<input type="text"/>	
** Reissue claims in excess of 20 and over original patent					<input type="text"/>	
SUBTOTAL (3)			<input type="text" value="(\$ 260)"/>		<input type="text"/>	
4. SEARCH/EXAMINATION FEES						
Fee Description						
Utility Search Fee					<input type="text"/>	
Design Search Fee					<input type="text"/>	
Plant Search Fee					<input type="text"/>	
Reissue Search Fee					<input type="text"/>	
Utility Examination Fee					<input type="text"/>	
Design Examination Fee					<input type="text"/>	
Plant Examination Fee					<input type="text"/>	
Reissue Examination Fee					<input type="text"/>	
SUBTOTAL (4)			<input type="text" value="(\$ 0)"/>		<input type="text"/>	

**or number previously paid, if greater; For Reissues, see above

SUBMITTED BY		Complete (if applicable)			
Name (Print/Type)	G. Gregory Schives Bryant E. Wade	Registration No. (Attorney/Agent)	27,382 40,344	Telephone	248,641,1600
Signature				Date	January 9, 2007

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